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ICF/MR RESIDENT ORIGIN STUDY

Southeastern Minnesota



Health . Son

FOREWORD AND ACKNOWLEDGEMENT

Much appreciation goes to all of those who assisted in completing the study: the administrators and program directors of the Intermediate Care Facilities (ICFs), those who completed the questionnaires and those who aided in compiling the data and preparing this report, especially Jeff Tenney and Karen Sobotta.

It is intended that this document be a basic planning tool for the region to meet the needs of mentally retarded persons and that future studies be developed from it.

Contact the SEMHSA office if you have questions or comments.

Ruth Voss Study Coordinator

DECEMBER 1982

Based on survey Completed as of January 25, 1982 Southeastern Minnesota Health Systems Agency 2200 Second Street SW Rochester, MN 55901 (507) 285-0900

SUMMARY OF FINDINGS

- 1. Forty-five percent of the residents in southeastern Minnesota Intermediate Care Facilities for Mentally Retarded are between the ages of 21 and 40.
- 2. The mean and median age of the residents is 30 and 27.5, respectively.
- 3. There are slightly more males than females in the ICFs.
- 4. The severely retarded represent 35.8% of the MR population in ICFs; 30.5% are moderately retarded. Nineteen percent are mildly retarded and 14.6 percent are profoundly retarded.
- 5. Fifty-one percent of the residents have no other disability in addition to mental retardation. Forty-nine percent have epilepsy, mental illness, cerebral palsy or some other disability in addition to mental retardation.
- 6. There were three peak years when increasing numbers of mentally retarded persons left home for the first time-1971, 1976, and 1981. The addition of facilities at that time, which increased availability of ICF beds, was probably a contributing reason for the increase.
- 7. When moving for the first time for other care, 30% of the mentally retarded people went to state hospitals, 20.3% to Class A ICFs, and 19.6% to Class B ICFs.
- 8. The mean length of stay in the current facility is 3.8 years. The average stay in adult facilities (3.5 years) is less than in children's homes (approximately five years). The length of stay is relatively short because most ICFs are new. Twenty-six of the 32 facilities have been built since 1976. Forty-two percent of the beds available at time of the survey had been added in the last four years, thus bringing the mean length of stay closer to four years.
- 9. One third (33.6%) of the ICF/MR population in southeastern Minnesota surveyed (453 residents) came to their current residence from home. Thirty-two percent came from a state hospital. The others came from other types of residences such as ICF, foster home, nursing home, board and care homes.
- 10. Thirty percent of the residents have had single placements (47% of those in children's homes and 23% in homes for adults).
- 11. Approximately half, 51.9%, of all residents have never lived in a state hospital. However, 57.7% of those in facilities for adults have resided in a state hospital at some point in time, not including respite care.
- 12. Twelve percent of the population has lived in two or more state hospitals. Four other residents have lived at the same state hospital for two or more periods of time.
- 13. Approximately 20% of the residents in SEMHSA area ICFs/MR are from outside the region.
- 14. The major type of day activity is the developmental achievement center, followed by school, and the sheltered workshop. School buses are the main type of transportation to day activity for 42% of the MR population.
- 15. Approximately 50% of the residents are at optimum placement. Sixteen percent could be transferred to Class A ICFs and 15% could move to independent living programs within two years.

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ICF/MR RESIDENT ORIGIN STUDY

INTRODUCTION

Intermediate Care Facilities for the Mentally Retarded (ICFs/MR) became a new style of living in the 1970s. Prior to the ICFs, mentally retarded persons were housed in schools, homes and state institutions. Aided by Medicaid (Medical Assistance as it is called in Minnesota), the Department of Public Welfare began subsidizing the care of mentally retarded individuals in group homes, licensed as supervised living facilities. In addition, the Welsch vs. Noot Consent Decree of 1980 required the number of mentally retarded persons in state hospitals to be reduced over the following seven-year period.

Because of these policies, Minnesota has become a national leader in the development of ICFs and the philosophy of deinstitutionalization. In 1977, Minnesota ranked first in the number of ICFs with 7.9 mentally retarded persons in community residential facilities per 10,000 population, approximately twice the national average of 3.9.

At the time the study was completed, there were 463 ICF/MR beds available in southeastern Minnesota, This number does not include the 73 beds at Laura Baker School, a supervised living facility not certified as an ICF. Through the Certificate of Need process, 155 beds have been approved to be built which brings the total in southeastern Minnesota to 618 ICF/MR beds.

The Southeastern Minnesota Health Systems Agency is responsible for reviewing Certificate of Need applications and recommending approval or disapproval of the proposals to the Commissioner of Health, Minnesota Department of Health, who makes the final determination.

The Southeastern Minnesota Health Systems Plan V identified a need for additional community-based ICF/MR beds with a guideline of 16.0 beds per 10,000 population per county for assessing a new project in the region. The policy of deinstitutionalization and the Welsch vs. Noot Court decision to reduce the number of mentally retarded persons in state hospitals encourage alternative community living.

To assist in determining where beds should be added, the Health Systems Plan recommended that a resident origin study of the ICF/MR population in Southeastern Minnesota be completed in January 1982. The study questionnaires were completed for the population as of January 25, 1982 with a 100% response rate from the ICFs.

The study:

- 1) describes the current service population by age, sex, retardation level and secondary disability;
- 2) identifies residential migration and referral patterns;
- 3) identifies the trend in the rate of deinstitutionalization over recent years;
- 4) identifies present day-programs used by the residents, and
- 5) identifies two-year placement goals for the residents.

METHODOLOGY

A survey form, instruction sheet, and code sheet were developed in consultation with the local administrators and program directors of the ICFs. The forms are included as appendices to the report.

The forms were sent to the ICFs in December 1981 to be completed as of January 25, 1982 and returned to SEMHSA by February 1, 1982. The remaining forms were received in April and data analysis commenced. The Laura Baker School, Northfield, did not participate.

The information was computerized and analyzed using SPSS (Statistical Package for the Social Sciences).

PRESENTATION OF THE INFORMATION

The data of the report are primarily descriptive. Statistical analysis revealed rare significant relations or effects among the variables and these are not included in the report. The "Summary of Findings" highlights the data obtained from the study. The tables and graphs which follow provide detailed information by facility, county, and the region, A short narrative describing the data accompanies each section.

Bar graphs compare residents in the adult facilities to those in the children's facilities as shown below:



The adult facilities are primarily for persons aged 18 and over although there is no specific cut-off age for admission. The homes for children are primarily for persons under age 18. On the next page, Facility Data, the children's facilities are starred.

Another important distinction to make is between Class A and 8 ICFs. A Class A ICF is a home for ambulatory and mobile persons who are capable of taking appropriate action for self-preservation under emergency conditions as determined by program licensure provisions. A Class B ICF is a home for ambulatory, nonambulatory, mobile or nonmobile persons who are not mentally or physically capable of taking appropriate action for self-preservation under emergency conditions.

	-	,			
FACILITY DATA FACILITY NAME, LOCATION	CLASS1	# BEDS	# OF RESIDENTS JAN. 25, 1982	INITIAL ICF/MR YEAR OF CERTIFICATION ²	OWNERSHIP3
					-
Fourth Street House, Kasson	A	14	12	12/77	P
Dodge Residence, Dodge Center	A	8	8	1/80	P
Sunshine Place, Harmony	A	12	12	7/77	NP
Crest Home, Albert Lea	A	15	15	2/75	NP
Woodvale V. Albert Lea	A	32	30	5/80	P
1 (1) (1) (1) (1) (1) (1) (1) (1) (1) (1			1077		
Red Wing Group Home, Red Wing	A	12	12	3/77	NP
Riverview Manor, Wanamingo	A	15	15	6/80	NP
*Vasa Children's Home, Red Wing	В	55	53	(63) 74	NP
Houston Co. Group Home, Caledonia	A	13	13	8/80	NP
*Cedar I, Austin	A	10	9	10/79	P
*Cedar II, Austin		8	9	2/81	P
*Cedar III, Austin	A	6	6	3/80	P
*Cedar IV, Austin	A	6	6	3/80	P
Woodvale III, Austin	8	41	41	74	P
REM SE, Rochester	A	15	15	9/80	P
REM NW, Rochester	A	15	15	9/80	P
Bear Creek House, Rochester	A	6	6	7/77	NP
Meadow Park House, Rochester	A	6	6	1/79	NP
Sixth Street House, Rochester	A	6	6	5/76	NP
Southside House, Rochester	A	6	6	10/80	NP
*Hiawatha Childrens Home, Rochester	В	44	40	8/76	NP
Kennedy-Johnson (7th St. House), Faribault	8A, 78	15	15	6/79	p.
Haven Homes, Inc., Faribault	A	9	9	(68) 74	NP
Harmony House, Faribault	A	8	8	(72) 74	NP
Region Park, Faribault	A.	12	12	3/77	P
Kroeger's House, Faribault	A	6	6	9/75	P
Park Avenue, Faribault	A	15	15	77	P
Woodvale II, Owatonna	A	15	15	10/79	Р
Rustic Lane, Wabasha	A	8	8	9/76	NP
Great River Homes, Lake City	A	8	8	8/80	NP
Winona Group Home I, Winona	A	12	12	7/76	NP
Winona Group Home, II, Winona	A	10	10	81	NP

[&]quot;Children's ICFs, majority of residents under 20 years of age.

IClass & ICF: Homes for ambulatory and mobile persons who are capable of taking appropriate action for self-preservation under emergency conditions as determined by program licensure provisions.

Class & ICF: Homes for ambulatory, nonambulatory, mobile or nonambile persons who are not mentally or physically capable of taking appropriate action for self-preservation under emergency conditions.

**Rumper in parentheses () indicates year of licensure as Supervised Living facility (SLF). See gage—for more information.

**Propries of the self-profit indicates year of licensure as supervised Living facility (SLF). See gage—for more information.

NUMBER OF ICF/MR BEDS AVAILABLE IN SOUTHEASTERN MINNESOTA BY YEAR

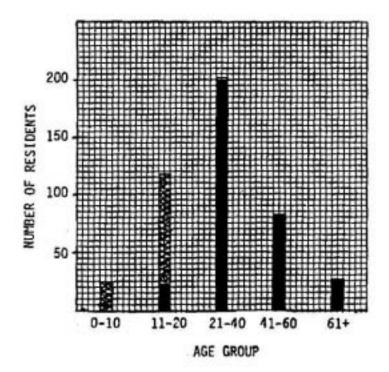
Year Certified as ICF/MR (or serving MR residents*)	ring Cummulative		Percentage Class A and B Beds		
Before 1974	1	12	n	A-17 8-55	(245) (765)
1974	1	41	113	A-17 8-96	(15%) (85%)
1975	ž	žί	134	A-38 8-96	(28%) (72%)
1976	•	70	204	A-64 S-140	(33%) (69%)
1977 -	6	71	275	A-135 8-140	(49%) (51%)
1978	0	0	275	A-135 8-140	(491) (511)
1979	•	46	321	A-174 9-147	(541) (461)
1980	10	124	445	A-298 8-147	(671) (331)
1981 (open as of 1/82)	2	18	463	A-361 8-147	(68%) (32%)
(approved but not open at time of study)		129	592	A-375 B-217	(63%) (37%)
(approved but not open)	2	26	618	A-385 B-233	(63%) (37%)

Prior to 1974, double certification was required for homes serving the mentally retarded. One was under DPW Rule 36 as a Supervised Living Facility (SLF) and the other was under the Board of Health, similar to Board and Lodging, Hotel/Bar certification. In 1974 Rule 36 was rewritten to eliminate the previous duplication. Now homes are licensed as SLFs by class and then certified as ICFs/MR.

The homes developed gradually until 1980 when there was a building spurt of 10 facilities and 124 beds. Prior to 1977 there were more Class B beds than A beds available. In 1977 and 1978 the numbers were almost equal. Then more A beds were built, peaking in early 1981 and decreasing slightly to equal 63% of total beds at the end of 1981 and in 1982.

	0-10	11-20	21-40	41-60	61+
DOUGE					
Fourth Street House Dudge Residence		1 2	6	3 2	2
County Total			10	5	- 1
FILLMORE			1.1		
Sunshine Place		1		6	1
County Total		11			1
PREZECON					
Crest Home Woodwale Y		1 3	20	6 7	•
County Total			24	13	
GOODHUE		1			
Red Wing Group Home Riversiew Manor Yasa Children's Home	6	2 2 46	9 9 1	3	1
County Total	6	50	19		_1
HOUSTON					
Houston Co. Group Home		1	10	3	
County Total	0	1	10	3.	
HOWER	100		1		
Cedar II Cedar III Cedar IV Woodvale III	1 1	9 9 5 5	31		2
County Total	2	30	31	6	2
OLMSTED		1		10000	
REM SE REM MM Bear Creek Headow Part Mouse Sixth Street House Southside Mouse Hiawatha Children's Mome	. 17	l i	11 9 5 1	3 5 1 3 1	1 2
County Total	17	23	23	16	5
RICE		1			
Kennedy Johnson Haven Homes, Inc. Harmony Kouse Region Part Eroeper's House		1 1	1 6 6 7 7	7 2 2 4 2	1
Park Avenue		2		3	2
County Total			31	20	10
STEELE		16	122		9
Woodvale II		2	10	,	ļ
County Total		1	10	,	
NABASHA					ĺ
Rustic Lane Great River Homes			14	,	
County Total	-		-	2	
Winona Group Home I Winona Group Home II			11 5	1	1
County Total		18	16	5	1
REGION TOTAL	26 (5,58)	117 {25.83}	202 (44.65)	83 (18,3%)	26 (5.73

w	Adelt	1CFs	A11	ICF ₁
Years	Mumber	Percent.	Munder	Fercent
0 - 10	0	0.0	25	5.5
11 - 20	23	6,9	117	25,4
21 - 40	199	60.1	505	44.6
41 - 60	83	25,1	83	18.3
61+	26	7.9	26	5.7
TOTAL	331	100.0	453	100.0



The largest percentage of residents are ages 21-40. Even when the 0-10 and 11-20 groups are added together to give an equal 20 year interval, those residents 21-40 comprise 40% more than the 0-20 year old group.

NUMBER OF RESIDENTS LESS THAN 18 YEARS OF AGE

AND 18 OR OLDER RESIDING IN THE ICFs

COUNTY	> 18	<18
DODGE		
DODGE	1.0	0
Fourth Street	12	0
House Dodge Residence	8	0
FILLMORE		0
Sunshine Place	12	o o
Builbillie Trace	12	
FREEBORN		
Crest Home	15	0
Woodvale V	30	0
GOODHUE		•
Red Wing Group Home	12	0
Riverview Manor	14	1
Vasa Childrens Home	10	42
HOUSTON		
Houston Co. Group Hone	13	0
Houseon Co. Group Hone	13	U
MOWER		
Cedar I	5	4
	3	
Cedar II		6
Cedar III	2	4
Cedar IV	1	5
Woodvale III	41	0
OLMSTED		
REM SE	15	0
REM NW	15	0
Bear Creek	6	0
Meadow Park House	6	0
Sixth Street House	6	0
Southside House	6	0
Hiawatha Childrens Home	9	31
DIGE		
RICE	1.5	0
Kennedy Johnson	15	0
Haven Homes, Inc.	9	0
Harmony House	8	0
Region Park	12	0
Kroeger's House	6	0
Park Avenue	15	0
STEELE		
Woodvale II	15	0
	23	J
WABASHA	0	0
Rustic Lane	8	0
Great River Homes	8	0
WINONA		
Winona Group Home I	12	0
Winona Group Howe II	10	0
Children's Facilities	20 (24 60.)	00 /75 40 \
	30 (24.6%)	92 (75.4%)
Adult Facilities	330 (99.7%)	1 (.3%)
All Facilities	360 (79%)	93 (21%)

THE AVERAGE AGE OF THE ICF POPULATION IS APPROXIMATELY 30.

Only one of the adult facilities has a resident under 18 years of age. Thirty (24.6%) of the residents of children's homes are 18 years or older.

There is no specific cut-off age for discharge from the children's homes; however, most residents leave before age 21.

The mean and median ages at the children's homes are 14 and 15 respectively, approximately 20 years younger than residents of the adult homes. The larger number of adults accounts for the higher mean and median of 30 and 27.5 respectively for the entire ICF population.

The mean and median ages indicate that Hiawatha Children's Home has the youngest population. At the time of the study, several. adults were living there temporarily after moving from the Rochester Social Adaptation Center. They planned to move into the new Hiawatha Adult Home, which opened in June 1982.

For most facilities (21-66%), the mean and median do not vary more than 3 years. More variation occurs when there are small numbers and an uneven distribution of residents. For example, Riverview Manor has a variation of 7 years between the mean and median, because there are 15 residents who range in age from 17 to 77. The 77 year figure skews the mean higher.

MEAN AND MEDIAN YEARS OF AGE

COUNTY	MEAN YEARS	MEDIAN
	OF AGE	YEARS OF AGE
DODGE		
Fourth Street House	42	43
Dodge Residence	29	23.5
FILLMORE	4.1	40 5
Sunshine Place	41	48.5
FREEBORN Crest Home	46	49
Woodvale V	34	34
GOODHUE		
Red Wing Group Home	26	24.5
Riverview Manor	34	27
Vasa Childrens Home	15	16
HOUSTON		
Houston Co. Group	32	30
Home		
MOWER Cedar I	17	18
Cedar II	16	16
Cedar III	15	15.5
Cedar IV	14	14.5
Woodvale III	33	31
OLMSTED	2.2	30
REM SE REM NW	32 33.6	28
Bear Creek	32	33.5
Meadow Park House	61	59.5
Sixth Street House	31	30
Southside House	54	57
Hiawatha Childrens Home	12	12.6
RICE		
Kennedy Johnson	54.6	60
Haven Homes, Inc. Harmony House	36 33.5	35 37.5
Region Park	39	33
Kroeger's House	34.6	39.5
Park Avenue	36.5	30
STEELE	31	33
Woodvale II		
WABASHA Rustic Lane	38	34.5
Great River Homes	36 27	27
WINONA	27.6	24
Winona Group Home I Winona Group Home II	45.8	45
_		
Children's Facilities Multi Facilities	14 36	15 34
All Facilities	30	27.5
001110100	5.0	2

AGE DISTRIBUTION BY SEX

SEX	AGE GROUP						
	0-10	11-20	21-40	41-60	61+	Total	
Male	15* 5.9 60.0	72 28.5 61.5	112 44.3 55.4	42 16.6 50.6	12 4.7 46.2	253 55.8	
Female	10 5.0 40.0	45 22.5 38.5	90 45.0 44.6	41 20.5 49.4	14 7.0 53.8	200 44.2	
Total	25 5.5	117 25.8	202 44.6	83 18.3	26 5.7	453 100.0	

*Reads as follows: 15 = actual number of residents
5.9 = percent of total males 60.0 = percent of total residents 0-10 years

The sex distribution is relatively even although there are slightly more males than females in all the facilities. There are more females in the 61+ age group only.

	Male	Female	Total
DODGE			
Fourth Street House	5	7	12
Dodge Residence	4	4	8
County Total	9	11	20
FILLMORE			
Sunshine Place	6	6	12
County Total	6	6	12
country local	0	0	12
FREEBORN	7	8	15
Crest Home	15	15	30
Woodvale V	22	23	45
County Total		23	15
G007-11-1			
GOODHUE Red Wing Group Home	6	6	12
Riverview Manor	8	7	15
Vasa Childrens Home	33	20	53
County Total	33 47	33	80
country rotar	¥ /	5.5	0.0
HOUSTON			
Houston Co. Group Home	9	4	13
County Total	9	4	13
_			
MOWER	0	0	0
Cedar I	9	0	9
Cedar II	7	2	9
Cedar III	4	2	6
Cedar IV	3	3	6
Woodvale III	26 40	15	41
County Total	49	22	71
OLMSTED			
REM SE	9	6	15
REM NW	9	6	15
Bear Creek	0	6	6
Meadow Park House	1	5	6
Sixth Street House	6	0	6
Southside House	3	3	6
Hiawatha Childrens	22	18	40
Home	50	44	94
County Total			
RICE		_	
Kennedy Johnson	8	7	15
Haven Homes, Inc.	9	0	9
Harmony House	0	8	8
Region Park	6	6	12
Kroeger's House	4	2	б 1 г
Park Avenue County Total	11 38	4 27	15 65
country rocar	50	<u></u>	<i>55</i>
STEELE			
Woodvale II	8	7	15
County Total	8	7	15
WABASHA			
Rustic Lane	2	6	8
Great River Homes	4	4	8
County Total	6	10	16
LIT NON A	c	6	1.0
WINONA	6	6 12	12
Winona Group Home I	3	13	10
Winona Group Home II	7	19	22
County Total			
REGION TOTAL	253	200	453
	(55.8%)	(44.2%)	
Adult ICFs	175	356	331

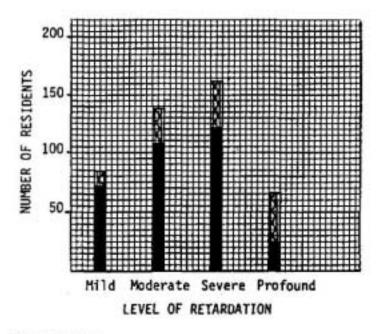
DISTRIBUTION OF LEVEL OF MENTAL RETARDATION

	Mild	Moderate	Severe	Profound	Not	MR
DODGE Fourth Street House Dodge Residence County Total	1 2 3	3 3 6	4 3 7	4		
FILLMORE Sunshine Place County Total		4 4	8 8			
FREEBORN Crest Horn Woodvale V County Total GOODHUE	2 1 3	4 15 19	5 14 19	4		
Red Wing Group Home Riverview Manor Vasa Childrens Home County Total	4 3 14 21	5 2 24 31	3 8 11 22	2 3 5		
HOUSTON Houston Co. Group Home County Total	9	2 2	2 2			
MOWER Cedar I Cedar II Cedar III Cedar IV Woodvale III County Total	3	1 14 15	9 20 29	9 5 6 4 24		
OLMSTED REM SE REM NW Bear Creek Meadow Park House Sixth Street House Southside House Hiawatha Childrens Home County Total	1 2 2 1	8 4 1 3 2 1 5	4 7 3 2 4 2 17	2 2 3 18 25		
RICE Kennedy Johnson Haven Hones, Inc. Harmony House Region Park Kroeger's House Park Avenue County Total	6 1 3 2 3 3 18	5 5 2 4 1 5 222	3 3 3 6 2 6 23	1 1 2		
STEELE Woodvale II County Total	5 6	2 2	7 7			
WABASHA Rustic Lane Great River Homes County Total	6 6	5 2 7	3 3			
WINONA Winona Group Home I Winona Group Home II County Total	7 3 10	4 2 6	1 2 3	2 2	1	
REGION TOTAL	85 (18.8%)	138 (30.5%)	162 (35.8%)	66 (14.6%)	1 (0.29	♂)

LEVEL OF MENTAL RETARDATION (continued)

LEVEL OF RETARDATION

Level	Adult ICFs Number Percent		All ICFs Number Percent		
Mild	71	21.5	85	18.8	
Moderate	108	32.6	138	30.5	
Severe	126	38.1	162	35.8	
Profound	25	7.6	66	14.6	
Not MR	1	0.3	1	0.2	
No Answer	0	0.0	1	0.2	
TOTAL	331	100.0	453	100.0	



^{*1} no answer *1 not MR

LEVEL OF MENTAL RETARDATION (continued)

In southeastern Minnesota, the largest percentage of the ICF population is severely retarded (35.8%). The number of moderately retarded (30.5%) is slightly less. The mildly retarded (18.8%) are the third largest percentage and the profoundly retarded comprise the smallest group (14.6%).

These four commonly accepted classifications may be defined by an IQ test score, by adaptive behavior characteristics, and by other characteristics. The classifications are listed below with corresponding IQ scores.

Mild: IQ Score—55 - 69
Moderate: 40 - 54
Severe: 25 - 39
Profound: Below 25

See Appendix A for adaptive behavior classifications.

This distribution is expected because the profoundly retarded require the most care and supervision and are likely to reside in state institutions. The mildly retarded are able to live in more independent situations, i.e., at home or on their own.

In the case of an adult who is not MR, Medical Assistance will reimburse a facility if a doctor has documented that the ICF/MR level of care is appropriate for the person.

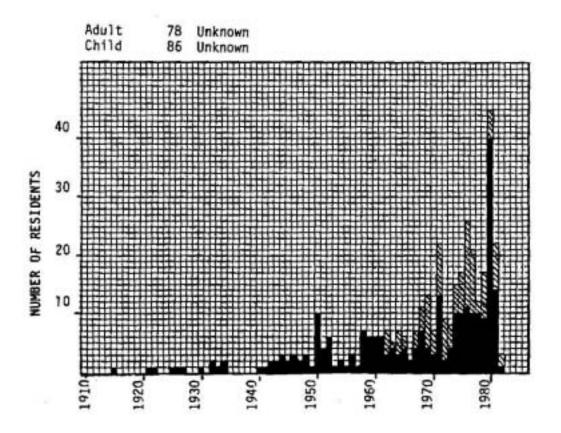
SECONDARY DISABILITY DISTRIBUTION

	Adult ICFs		All	ICFs
	Number	Percent	Number	Percent
Cerebral Palsy	12	3.6	22	4.8
Epilepsy	48	14.5	77	17.0
Mental Illness	21	6.3	22	4.9
Other	67	20.2	99	21.9
None	183	55.3	233	51.4
TOTAL	331	99.9 (100.0)	453	100.0

The majority of residents have no disability other than mental retardation. "Other" includes various illnesses from heart conditions and obesity to mental illness, blindness, and scoliosis.

YEAR RESIDENT FIRST LEFT HOME

	Adult	ICFs	All	
	Number	Percent	Number	Percent
1915 - 1930			7	1.5
1931 - 1940			6	1.3
1941 - 1950			29	6.4
(1950 and before)	(42)	(12.7)	(42)	(9.3)
1951 - 1960	37	11.1	37	8.2
1961 - 1970	40	12.1	71	15.7
1971 - 1980	119	36.0	192	42.4
1981 - 1982	15	4.5	25	5.5
Unknown	78	23.6	86	19.0
TOTAL	331	100.0	453	100.0



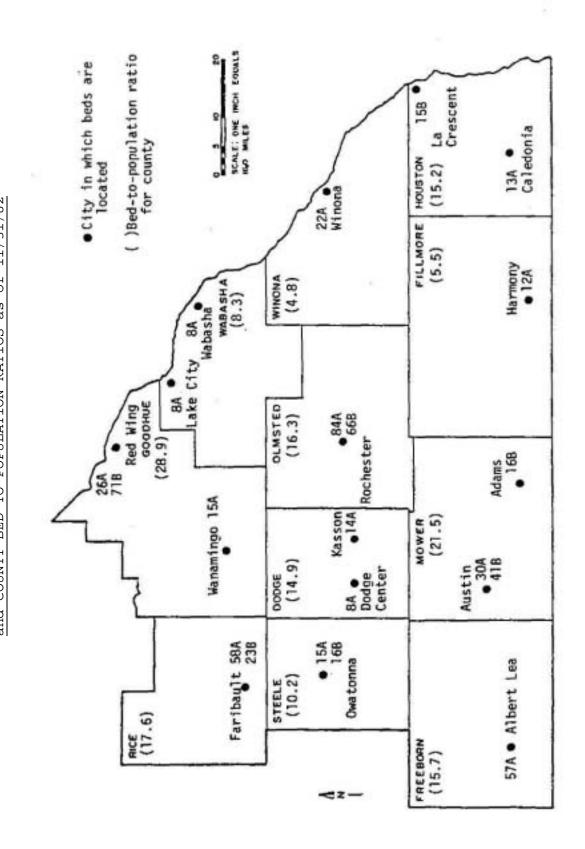
TYPE OF RESIDENCE AFTER FIRST LEFT HOME

	Adult	ICFs Percent		ICFs Percent
With Relative	28	8.5	29	6.4
Foster Home	10	3.0	22	4.9
Board Care Home	11	3.3	11	2.4
Class A ICF	66	19.9	92	20.3
Class B ICF	24	7.3	89	19.6
MN State Hospital	124	37.5	131	28.9
Other State Hospital	4	1.2	5	1.1
Nursing Home	9	2.7	9	2.0
Independent Living	5	1.5	5	1.1
Other	7	2.1	12	2.6
Unknown	43	13.0	48	10.6
	331	100.0	453	99.9 (100.0)

There are three peak years when residents first left their homes—1971, 1976 and 1980. This is accounted for by the increased availability of beds in 1976 and 1980. By the end of 1976, 204 beds were certified as ICF/MR beds. There was a substantial increase of 70 beds in 1976. The same holds true for 1980; 121 beds were added.

Upon leaving home, 28.9 percent of the residents went to state hospitals. Nearly equal numbers, 19.6 percent and 20.3 percent went to Class A or B ICFs, respectively. The adults show a different pattern; almost 40% went to state hospitals and 20% to Class A ICFs. Fifty-three percent of the children went to Class B ICFs.

NUMBER, TYPE and LOCATION of ICF/MR BEDS, RECOMMENDED FOR APPROVAL, in SOUTHEASTERN MINNESOTA and COUNTY BED-TO-POPULATION RATIOS as of 11/31/82



LENGTH OF STAY AT CURRENT FACILITY

	Year	Adult	ICFs	A	ll ICFs
Years	Admitted	<u>Number</u>	Percent	Numb	er Percent
<1	(1982)	4	1.2	6	1.3
1	(1981)	43	13.0	59	13.0
2	(1980)	120	36.3	141	31.1
3	(1979)	36	10.9	49	10.8
4	(1978)	35	10.6	38	8.4
5	(1977)	34	10.3	53	11.7
6	(1976)	23	6.9	54	12.0
7	(1975)	13	3.9	17	3.8
8	(1974)	14	4.2	16	3.5
9	(1973)	1	.3	2	0.4
10	(1972)	1	.3	1	0.2
11	(1971)			3	0.7
13	(1969)	2	.6	5	1.1
14	(1968)	4	1.2	5	1.1
18	(1964)			1	0.2
19	(1963)	1	0.3	2	0.4
No Ans	wer			1	0.2
TOTAL		331 1	00.0	453	99.9 (100.0)
		_	.511 .584	Mean Std. Dev.	3.823 2.860

Nearly one-third of all residents were admitted to their current residence in 1980. Almost equal numbers of residents entered ICFs in 1981 (13.0%), 1976 (12.0%), and 1977 (11.7%).

Over one-third of residents in adult facilities began living in their current residence in 1980. Accounting for this large number was the opening of eight adult facilities in 1980. Refer to page 3, Facility Data, for initial year of ICF/MR certification. Six adult ICFs were initially certified in 1977, four in 1976 and one in 1981.

The mean length of stay at the current residence is 3.8 years. The mean length of stay at the adult homes is slightly less, 3.5 years. Therefore, the mean length of stay at childrens facilities is considerably longer, approximately 5 years.

TYPE OF FIRST RESIDENCE PRIOR TO	CURRENT FACILITY	HOME AELATIVE	FOSTER HOME	BOARD/CARE HOME	CLASS A 1CF/PR	CLASS B 1CF/NR	W STATE HOSPITAL	OTHER STATE HOSPITAL	AURING HOVE	IMDEPENDENT	ОТИЕЯ
25	0006E										
59	Fourth Street Mouse Dodge Residence	2	1	1	5		4		1	2	1
	County Total	,	,	١.	5				1	2	2
	FILLMORE	-	-	-			-	-	-	-	-
	Sunshine Place		1	1	1		5			,	
	County Total		,	1	i		5			1	
	FALLDONN	-	-	1			-			-	
	Crest Home			١.							
65	Woodyale Y	5	1	2	3		17		2		
125	County Total	10	2	3	3		71		6		
	COCCHUE										7
	Red Wing Group Home Riverview Manar Yasa Childrens Home	4 2 39	1 6 2	1	2	1 2	1 9 7	1	1	1	
	County Total	45	,	1	3	7	17	1	2	1	
	HOUSTON										
	Houston Co. Group Yome	8		1	2		2	1			1 3
	County Total			1	1		2				
	HONER	101									
	Cedar I Cedar II Cedar III Cedar IV	2 8	1	1	8 7 5	,	1				1
	Moodvale III County Total	1,1	١.	1;	24		20		1		1
	- F	1	-	1	1	1	1	1			·
	DEMSTED REM SE REM MM Bear Creek Meadow Park House Sixth Street House Southside House Hiawatha Childrens Home	4 3 1 2 1 27	1 1 2 1 5	1	3	3	9 5 1 1 4 2 12		2 2 1		1
	County Total	31	10	1	6	2	34		7	_	2
	RICE										
	Kennedy Johnson Haven Homes, Inc. Harmony Neuse Region Park Kroeger's House Park Avenue	1 5 2 3 2 4	1	2 7	1 2		6 5 3 2		3	1	
6	County Total	17	1	9	,	L	25	_	3	1	┖
120	STEELE	1		1		1	1	1			
	Woodvale II	2		L		1				1	1
	County Total	2	-	-	1 4	-	8	-	-	-	1
	WABASHA	1		1	1						1
	Rustic Lane Great Hiver Homes	2			1	1	1	1	2		
	County Total			1	1	1	1	1	1 2		1

TYPE OF FIRST RESIDENCE PRIOR TO CURRENT FACILITY (continued)	HOME / MELATTYE	FOSTER HOME	BOARD/CARE HOPE	CLASS A 1CF/198	CLASS 8 ICT/HR	PR STATE HOSPITAL	OTHER STATE HOSPITAL	MURTHE HOPE	ETVING LIVING	OTHER
WINDMA										
Winona Group Home I Winona Group Home II	11 2		1 2	1		,		2		
County Total	13	_	3	1		3		2		L
REGION TOTAL	152	20	20	59	20	143	1	27	5	6
	(33.6)	(4.4)	(4.4)	(13.0)	(4.4)	(31.6)	(0.2)	(0.9)	0.0	(1.3)

One third of the ICF/MR population in southeastern Minnesota left home to come to their current residence. Twenty-eight percent of the residents of adult facilities came directly from home. Forty-eight percent of the residents in children's homes came directly from home.

TYPE OF FIRST RESIDENCE PRIOR TO CURRENT FACILITY

Comparison between Adult and All ICFs

	Adul	t ICFs	A11	1CFs
	Mumber	Percent	haber	Fercest
Home/Relative	94	28,4	152	33,6
Foster Home	12	3,6	20	4.4
Board/Care Home	20	6.0	50	4.4
Class A ICF	33	10.0	59	13.0
Class B ICF	15	4.5	20	4.4
MM State Mospital	153	37.2	143	31.6
Other State Hospita)			1	0,2
Nursing Hone	25	7.6	27	6.0
Independent Living	5	1.5	5	1.1
Other '		1.2	5	1.1
Unknown	_	_	_1	0.2
TOTAL	231	100,0	453	100.0

In comparison, 31% of the ICF population came to their current residence from a Minnesota state hospital. Only 16% of the persons in children's homes came directly from a Minnesota State Hospital.

Thirteen percent of the residents (10% from the adult homes) moved from another Class A ICF/MR to their current residence.

TYPE OF SECOND RESIDENCE PRIOR TO CURRENT FACILITY

	Acult 107s		ATT	IO1
	Ruster	Forcent	Mannet	Fercent
Home/Relative	64	20.5	103	22.7
Fester Home		2.4	15	1.1
Board/Care Nome	20	6,0	20	4.4
Class A ICF	10	3.0	14	3.1
Class & ICF	3	0.9	7	1.5
MM State Hospital	84	25.4	67	19.2
Other State Hospital	1	0,3	1	0,2
Nursing Home	5	1.5	5	1.1
Independent Living	1	0.3	1	0.2
Other/Untrown	131	39.6	200	44.2
	331	(100.0)	453	(100.0

This table shows similar information; the majority of residents came from home (22.7%) or a Minnesota state hospital (19.2%) to live in the facility prior to their current residence. Because one-third of the residents came from home to their current residence, it may be assumed that they never lived any other place. The 44.7% would include these persons as well as those who lived in facilities or where the residence was unknown.

TYPE OF PLACEMENT

Thirty percent of the residents have had single placements, half of the children and .23% of the adults.

Single Placement	<u>Total</u>	ICFs for Children	ICFs for Adults
Home to ICF-B	66	54	12
Foster Home to ICF-B	1	1	
Home to ICF-A	69	3	66
	136 (30%)	58 (47%)	78 (23%)

Twenty-two percent of the residents have had two placements since leaving home, 30% in children's and 19% in adult facilities.

Twenty-one percent of the residents had lived in three placements since their home or original residence, 15% in children's and 23% in adult homes.

Eighteen percent of the residents of children's facilities, 54% of those in adult homes, and 44% of the entire group have lived at least three places after leaving their original residence.

Over three percent of the residents of children's homes, 24% of those in adult homes, and 18.5% of the total population have lived at least four places since their original residence.

Twelve percent of the group has lived in two or more state hospitals.

	Total	ICFs for Children	ICFs for Adults
	10001	CIIII CII	1100100
State Hospital to ICF-B	20	3	17
State Hospital to ICF-A	34	0	34
	54 (12%)	4 (2.5%)	51 (15%)

Four other persons have lived at the same state hospital for two or more periods of time.

	Adult			ICFs
1920 - 1929	Number 8	Percent 2.4	Number 8	Percent 1.8
1930 - 1939	2	1.0	3	0.8
1940 - 1949	13	3.9	13	2.9
1950 - 1959	54	16.3	55	12.1
1960 - 1969	39	11.8	S3	18.3
(1970 - 1979)	(172)	(52.0)	(239)	(52.7)
1970	24	7.3	32	7.1
1971	25	7.6	32	7.1
1972	17	5.2	26	5.7
1973	22	6.6	32	7.1
1974	16	4.8	25	5.5
1975	13	3.9	21	4.6
1976	12	3.6	21	4.6
1977	16	4.8	20	4.4
1978	19	S.7	19	4.2
1979	В	2.4	11	2.4
1930	12	3.6	16	3.5
1981	4	1.2	6	1.3
Unknown	26	7.9	30	6.6
	331	100.0	453	100.0

YEAR OF ADMISSION TO SECOND RESIDENCE PRIOR TO PRESENT FACILITY

		T. G.D.		T. G.D.
		ICFs		ICFs
	Number	Percent	Number	Percent
1910 - 1919	5	1.5	5	1.1
1920 - 1929	4	1.2	4	0.9
1930 - 1939	12	3.6	12	2.7
1940 - 1949	17	5.1	V	3.8
1950 - 1959	48	14.5	48	10.6
1960 - 1969	43	13.0	86	18.9
1970 - 1979	48	14.S	64	14.1
1980	1	0.4	1	0.2
Unknown	153		216	47.7
	331	100.0	453	100.0

DODGE Fourth Street House Dodge Residence County Total	Yes 7 3 10	No 5 5 10	Unknown
FILLMORE Sunshine Place County Total	6 6	6 6	
FREEBORN Crest Home Woodvale V County Total	8 20 28	6 8 14	1 2 3
GOODHUE Red Wing Group Home Riverview Manor Vasa Childrens Home County Total	1 12 8 21	11 3 45 59	
HOUSTON Houston Co. Group Home County Total	5 5	8 8	
MOWER Cedar I Cedar II Cedar III Cedar IV Woodvale III County Total	0 1 0 0 27 28	9 8 6 6 14 43	
OLMSTED REM SE REM NW Bear Creek Meadow Park House Sixth Street House Southside House Hiawatha Childrens Home County Total	10 10 2 5 4 5 11	5 5 4 1 2 1 29 47	
RICE Kennedy Johnson Haven Homes, Inc. Harmony House Region Park Kroeger's House Park Avenue County Total	11 4 6 8 5 10 43	3 5 2 4 1 5	1
STEELE Woodvale II County Total	10 15	5 5	
WABASHA Rustic Lane Great River Homes County Total	4 1 5	4 7 11	
WINONA Winona Group Home I Winona Group Home II County Total	1 6 7	9 3 12	2 1 3
REGION TOTAL	211	235 (51.9)	7 (1.5)
Adult ICFs	191	133	7 (2.1)

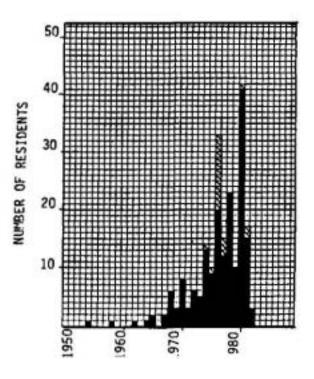
Approximately half of the residents have never lived 1n a state hospital

	Adult Number	ICFs Percent	All ICI NumberPer	
Less Thin One Year	3	0.9	3	0.1
1	15	4.S	17	3.8
2	41	12.4	42	9.3
3	10	3.0	10	2.2
4	23	6.9	23	5.1
5	12	3.6	15	3.3
6	20	6.0	33	7.3
7	9	2.7	10	2.2
8	13	3.9	14	3.1
9	5	1.5	5	1.1
10	6	1.8	6	1.3
11	2	0.9	3	0.7
12	8	2.4	8	1.8
13	3	0.9	3	0.7
14	6	1.8	6	1.3
15	2	0.6	2	0.4
17	2	0.6	2	0.4
18	1	0.3	1	0.2
20	1	0.3	1	0.2
22	1	0.3	1	0.2
26	1	0.3	1	0.2
Never Resided in a State Hospital	133	40.2	235	51.9
Unknown	13	4.1	12	2.6
TOTAL	331	100.0	4S3	100.0
	Mean: St. Dev.:	5.822 4.648	Mean: St. Dev:	5.772 4.442

$\begin{array}{cccc} {\tt NUMBER} & {\tt OF} & {\tt YEARS} & {\tt SINCE} \\ \\ {\tt RESIDENT} & {\tt WAS} & {\tt LAST} & {\tt DISCHARGED} \\ \hline & {\tt FROM} & {\tt A} & {\tt STATE} & {\tt HOSPITAL} \\ \end{array}$

There are two peak years when residents were discharged from state hospitals--1976 and 1980. As noted earlier, many beds became available during these years. Another reason for the 1980 peak is the Welsch vs. Noot decree requiring many to enter community-based homes.

The average number of years since residents were discharged from a state hospital is 5.7. The number is slightly higher for those in adult homes indicating that the average for those in homes for children must be slightly less than for those in homes for adults.



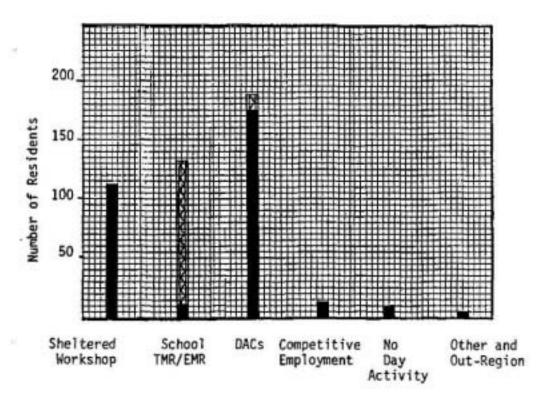
TYPE OF DAY ACTIVITY

	Adult : Number :			ICFs Percent
Sheltered Workshops	113	34.1		24.9
School	12	3.6	132	29.2
DACs	176	53.3	178	39.3
Competitive	13	3.9	13	2.9
Employment None	11	3.3	11	2.4
Other/Out-Region	6	1.8	6	1.3
Region Total	331	100.0	453	100.0

The majority of residents go to Developmental Achievement Centers (DACs) during the day. According to law, at least 36 hours of activity outside the ICF must be provided to the residents. DACs fill this need for most of the residents. This law is not strictly enforced.

Public schools are mandated to provide educational programs for nine years of secondary education, or until the child is 21 years old, for all handicapped children ages 4 to 25. Because of this law, all children must attend school. Some of the residents in children's homes are older and have finished their schooling; therefore they go to DACs.

A large number of the residents work at sheltered workshops. Over ten are working in competitive employment and several have no structured day activity. Some of the older residents may have retired.



TYPE OF TRANSPORTATION TO DAY ACTIVITY

	Van or Car	School Bus	City Bus	Contract Bus	Other (walk or DAC Bus)
DODGE					
Fourth Street House Dodge Residence County Total	2	0	0	3 5 8	7 3 10
FILLMORE Sunshine Place County Total		11 11			1
FREEBORN Crest Home Woodvale V County Total		10		22 11	5 8 13
GOODHUE Red Wing Group Home Riverview Manor Vasa Childrens Home County Total		12 46 58		11	4 7 11
HOUSTON Houston Co. Group Home	8				5
County Total	8				5
MOWER Cedar I Cedar II Cedar III Cedar IV Woodvale III County Total		9 9 6 6 23 53		18 18	
QUOTED REM SE REM NW Bear Creek Meadow Park House Sixth Street House Southside House Hiawatha Childrens Home	9 10 4 2 5 2	1 1 38	3 4 6 2 4	2 0	0 0
County Total	32	40	19	3	0
RICE Kennedy Johnson Haven Home, Inc. Harmony House Region Park Kroeger's House Park Avenue		5 6		8 4 2 10 3	7 1 3
County Total		13		38	11
STEELE Woodvale II County Total		2 2		7 7	6 6
WABASHA Rustic Lane Great River Homes County Total		5 5		3 3	8
WINONA Winona Group Home I Winona Group Hone II County Total			11 7 38	3 3	1
REGION TOTAL	42 (9.3)	192 (42.7)	37 (8.2)	113 (25.1)	66 (14.7)
# for Adult ICFs	40 (12.1)	78 (23.6)	37	113 (34.1)	60 (18.1)

TYPE OF TRANSPORTATION TO DAY ACTIVITY (continued)

TYPE OF TRANSPORTATION TO DAY ACTIVITY

	Adult Number			ICFs Percent	
ICF Van/Car	40	12.1	42	9.3	
School Bus	78	23.6	192	42.4	
City Bus	37	11.2	37	8.1	
Contractual Bus	113	34.1	113	24.9	
Other (i.e., Walk, DAC Van)	60	18.1	66	14.6	
Not Answered	3	0.9	3	0.7	
	331	100.0	453	100.0	

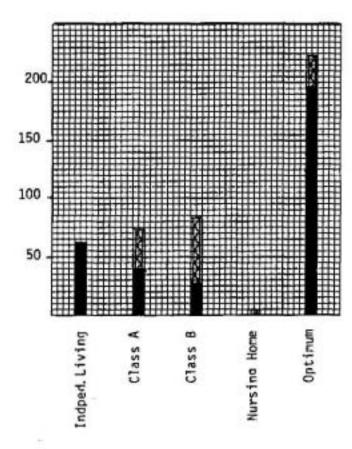
Forty-two percent of the residents ride the school bus to their day activity. However, 34% of the residents in adult homes use a contractual type of bus for transportation. Many of the residents use some other means of transportation such as walking or riding a DAC van.

PLACEMENT GOAL

	Indep Living	Class A	Class 8	MN State Mospital	Home Home	Placent.	Uther
900GE		a dista				Processes.	
Fourth Street House Bodge Residence	1					9	
County Total	1					_13	
FILLMORE							
Sunshine Place County Total					1	11	
FREEDORN					-	-11	-
Crest Home Woodyale Y	1		26		1	11	
County Total	5		26	h	1	11	
GOODHUE							-
Red Wing Group Home Riverview Manor Vasa Childrens Home	5 2 1	3	1 48	1		2 12	
County Total	8		49	1_1_		14	
HOUSTON							
Mouston Co. Group Home		3		. 3	1	5	
County Total		,			1	5	
HOWER .							
Cedar II Cedar III Cedar III Cedar IV Woodwale III	12	9 9 6 6				28	
County Total	12	_32_				28	
DUMSTED					-		
REM SE REM Me Bear Creek Headow Park Nouse Sixth Street House Southside House Hiawatha Childrens Home	2 1 2	;	,			9 9 4 6 6 6	2
County Total	5	10	9			68	2
LICE		- 1					
Ennedy Johnson Haven Homes, Inc. Harmony Mouse Region Part Kroeger's House Park Avenue	3 3	12				15 9 8 9 3	
County Total	6	11		100		47	
STEELE							
Woodwale 11	,				85 SI		1
County Total	,				L6		
KABASHA .							
Rustic Lane Great River Homes	2	,				8	
County Total	2	5				,	
VENORA						22-63.31	
Winona Group Home I Winona Group Home II	5 2	1	9			7	
County Total	1	1	_	-	_	14	
REGION TOTAL	63 (13,9)	(16,3)	84 (18,5)	(0.2)	(1.1)	224 (49,4)	(0.4)

PLACEMENT GOAL (continued)

	Adult Number	ICFs Percent	All Number	ICFs Perce
Independent Living	52	18.7	63	13.9
Class A ICF	40	12.1	74	16.3
Class B ICF	28	8.5	84	18.5
MN State Hospital	0	0	1	0.2
Nursing Home	5	1.5	5	1.1
At. Optimum Placement	196	59.2	224	49.4
Other	0	0	2	0.4
Total	331	100.0	453	100.0



Over 200 of the residents are at optimum placement, that is, their current residence is the most appropriate for them. By, January 1984, an independent living program is the goal for one person living in a children's home.

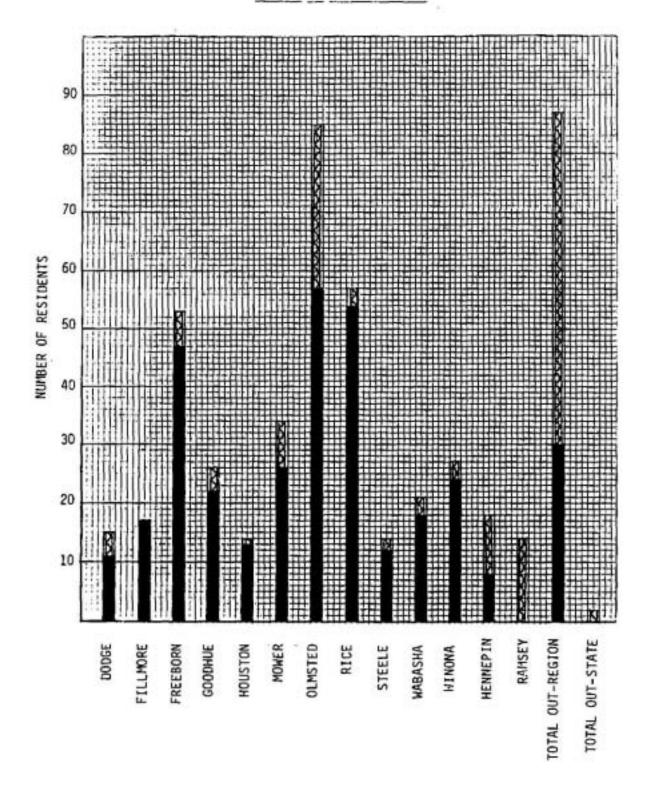
Forty-six percent of the residents in homes for children would continue to be appropriate for a Class B ICF by January 1984. Currently 76% of the residents in children's homes live in Class B ICFs. Because many of the residents are young, they would remain in their present home, essentially at optimum placement for the next two years.

AND COUNTY WARASIN COUNTY OF REIMBURSEMENT RICE DODGE Fourth Street House 2 1 2 1 Dodge Residence County Total Sunshine Place 10 1 1 Pine County Total FREEBORN Crest Home Woodvale Y 2 1-Brown, 1-Hennepin 13 30 County Total GOODHUE 4 1-Anoka,1-Mennepin 1-Martin,1-Ramsey 2 1-Dakota,1-Mennepin 38 2-Anoka,1-Seltrami 1-Siue Larth, Red Wing Group Home 1 1 1 11 Riverview Manor Yasa Childrens Home 1 4 2 3 1 1 38 3 2-Srown, 7-Datota 2-Srown, 7-Datota 9-Mennepin, 1-LeSeur 2-Morrison, 1-Mobles 7-Ramsey, 4-Washing, 1-Yellow Medicine County Total HOUSTON 13 Houston Co. Group Home County Total HOWER Cedar 1 1 Z 3 3 1-Faribautt 2-Bantey [1-Brown, 1-Micollet 2-Bantey [1-LeSeur, 1-Mobiles 2-Bloe Larth, Cedar II 2 1 1 1 Cedar III Cedar IV 1 1-Washington, 1-Hennepin 1-Watonwan 1-Faribault, Woodvale III 2 3 2 23 1 1 4 1-Jackson, 1-McLeod 1-Swift, 1-Washing. County Total DURSTED REM SE 1-Aitkin, 1-Pipestn 1-Isanti REM MA Bear Creek Meadow Park House Stath Street House 5644 1-Micollet 1-Datota ,1-Lansey 1-Renville, 1-Rock Southside House Hismatha Childrens Home 3 1 1 1 1 2 1-Natomes County Total RICE Kennedy Johnson 2 2-Hennepin Haven Homes, Inc. Harmony House Region Park 1 2 2 1-Hennepta 2 I-Sive Earth 3 Kroeger's Wouse 1-Hennepin 1-Hobies 1 Park Avenue County Total

COUNTY OF REIMBURSEMENT (continued)	30000	FILLHORE	FREEBORN	30H0000	HOUSTON	MONER	OLMSTED	RICE	STEELE	WARASHOA	WENCHA	00T-REG10#	NUMBER OF RESIDENTS AND COUNTY	DOI-STATE
STEELE Woodvale 11 County Total			2	1		1			,				1-Hennepin 1-LeSeur 1-St.Lowis,1-Scott	
WARASHA Rustic Lane Great River Homes County Total							2 2			6 14				
Winona Group Home I Winona Group Home II County Total		1	+				1 1 2			1	9 18			
REGION TOTAL	15 (6.6)	18 (0.9)	(11.7) 25	(5.7) \$	(3.1) 🕏	¥ (8.7)	(18.8) 35	(12.6) 25	1 (1.0)	2 (9.4)	(6.0) 5	(19.2) 2		(0.4)

County	Adul	t ICFs	Al	l ICFs
	Numbe:	r Percent	Numbe	r Perce
Dodge	11	3.3	19	3.3
Fillmore	18	5.1	18	4.0
Freeborn	47	14.2	53	11.7
Goodhue	22	6.6	26	5.7
Houston	13	3.9	14	3.1
Mower	27	7.9	34	7.5
01 Kited	57	17.2	85	18.8
Rice	54	16.3	57	12.6
Steele	12	3.6	14	3.1
Wabasha	18	5.4	21	4.6
Winona	24	7.3	27	6.0
Out- Region	30	9.0	87	19.2
Out-State	0	0	2	0.4
TOTAL	331	100.0	453	L00.0

COUNTY OF REIMBURSEMENT



COUNTY OF REIMBURSEMENT

A major study objective was to determine how closely to the county of reimbursement a person lives. A component of the deinstitutionalization concept encourages residential community living near one's family.

The facility distribution, comparison between adult and all ICFs, and the bar graph show that Olmsted, Rice and Freeborn Counties have the greatest number of residents in ICFs in southeastern Minnesota (85, 57, and 53 respectively). In five counties (Dodge, Fillmore, Steele, Wabasha and Winona), one third or more of the residents live outside their "home counties". The reason for this may be that there are fewer beds available in these counties.

The bed-to-population ratio is a good comparison because it adjusts for population. Fillmore, Steele, Wabasha and Winona Counties have the lowest ratios, all under 10 (see page 36). Steele and Winona Counties also have the fewest persons per population living in southeastern Minnesota ICFs. The Dodge County ratio is adequate but seven county residents live in homes in other counties, four in children's facilities which are unavailable in Dodge County. Because there are only 15 county residents in ICFs, the number living outside the county comprises a larger percentage. It must be noted, however, that 12 of the 20 residents in Dodge County ICFs are from other counties.

NUMBER (PERCENT) OF RESIDENTS LIVING IN OUT-OF-COUNTY ICFs

County	Number	(Percent)
Dodge	7	(46.7)
Fillmore	3	(44.4)
Freeborn	10	(18.9)
Goodhue	6	(23.1)
Houston	1	(7.1)
Mower	6	(17.6)
Olmsted	17	(20.0)
Rice	3	(5.3)
Steele	7	(50.0)
Wabasha	7	(33.3)
Winona	9	(33.3)

Forty-nine percent of the residents in children's ICFs are from outside the SEMHSA area, mainly from Ramsey and Hennepin Counties. This is because many beds are available in this region but are not available in other parts of Minnesota. Host of the SEMHSA counties have few children in ICFs. Fillmore has none.

Another relevant comparison is between the resident/population and the bed/population ratios by county.

The greatest resident-to-population ratios are found in Freeborn and Rice Counties, two of those identified with the most residents. They also have similar bed-to-population ratios, but are not the highest. Only 5.3%, of Rice County residents and 18.9% of Freeborn residents live in out-of-county ICFs. Nearly nineteen percent of Freeborn residents live in ICFs in Mower County or in homes for children, which are not available in Freeborn County. Steele County has the lowest resident-to-population ratio.

Steele has the lowest resident-to-population ratio and at the time of the survey also had a low bed-to-population ratio. Since that time a new facility, Rainbow Residence, has opened 16 Class B beds.

Caution must be used when comparing these figures because the study does not include persons living in ICFs outside of the eleven county area.

COUNTY POPULATION, NUMBER OF RESIDENTS BY COUNTY IN SEMHSA ICFs, AND RATIO OF RESIDENTS PER 10,000 POPULATION PER COUNTY

County	1980 Census	# SEMSHA County Residents in SEMSHA ICFs 01/25/82	# Residents Per 10,000 Pop.	% Of Pop.
Dodge	14,773	15	10.2	0.1
Fillmore	21,930	18	8.2	0.08
Freeborn	36,329	S3	14.6	0.15
Goodhue	38,749	26	6.7	0.07
Houston	18,382	14	7.6	0.08
Mower	40,390	34	8.4	0.08
Olmsted	92,006	8\$	9.2	0.09
Rice	46,087	57	12.4	0.12
Steele	30,328	14	4.6	0.05
Wabasha	19,335	21	10.9	0.11
Winona	46,256	27	5.8	0.06
Region Total	404,565	364	9.0	0.09

The county with the most residents in SEMHSA area ICFs, Olmsted, ranks fifth with a resident-to-population ratio of 9.2 because of its large population base. At the time of the survey the bed-to-population ratio was 10.6, but since then another facility opened and two more were approved, increasing the ratio to 16.3.

Goodhue County has few residents per 10,000 population but has the largest number of beds per population. Six (23%) of their residents live in out-of-county ICFs. Partially accounting for the large bed-to-population ratio is the 55 bed children's facility located in Red Wing with 73% of the residents from outside the region.

Both ratios are important when determining how many ICF/MR beds should be added in a county. Based upon work done by a task force, SEMHSA uses the guideline of 16.0 beds per 10,000 population when recommending development of beds. On January 25, 1982 there were 463 beds available, 11.4 beds per 10,000 population. Three hundred sixtyfour (80%) residents of the ICFs were from southeastern Minnesota. 0.09% of the region's population.

To date, 618 beds have been approved, 15.3 beds per 10,000 population, a considerable increase from those open in January 1982, but only a slight increase in those approved during 1981.

BED-TO-POPULATION RATIOS: AVAILABLE BEDS ON 1/25/82 APPROVED BEDS ON 12/31/81 AND 11/31/81

	# BEDS AVATLABLE 1/25/82	BEDS/10,000 POPULATION	BEDS APPROVED ICF/MR BEDS	BEDS/10,000 POPULATION	1982 APPROVED ICF/MR BEDS	BEDS/10,000 POPULATION
Dodge	22	14.9	22	14.9	22	14.9
Fillmore	12	5.5	12	5.5	12	5.5
Freeborn	47	12.9 -	47	12.9	57	15.7
Goodhue	82	21.2	112	28.9	112	28.9
Houston	13	7.1	28	15.2	28	15.2
Mower	72*	17.8	87	21.5	87	21.5
01msted	98	10.6	150	16.3	150	16.3
Rice	65**	14.1	65	14.1	81	17.6
Steele	15	4.9	31	10.2	31	10.2
Wabasha	16	8.3	16	8.3	16	8.3
Winona	22	4.8	22	4.8	22	4.8
Region Total	463	11.4	592	14.6	618	15.3

^{*}Cedar II, Austin, is licensed for eight beds but reported nine residents when surveyed. The additional person has been deemed appropriate for care at the home by a physician. Medical Assistance reimburses a facility based on the number of persons, not licensed beds. The additional bed has been included in that category only.

^{**}Does not include 73 beds at Laura Baker School, Northfield, a supervised living facility not certified as an ICF/MR. In 1981 approximately 20% of their residents were from southeastern Minnesota.

COUNTY OF FIRST RESIDENCE PRIOR TO PRESENT FACILITY

	35000	FTLLFORE	FREEBORN	3000000	HOUSTON	REMON	DUMBTED	RICE	STEELE	WARASHA	WENDRA	OUT-REGION	DUT-STATE	тоста
000GE														
Fourth Street Mouse Dodge Mesidence	5					1	1						1	
County Total	11					1	1						1	
FILLHORE	1		1											
Sunshine Place						1	1	1						
County Total	-	6	-	-	-	1	3	2	-	-	-		_	_
FREEBONK	1)												
Crest Home Mondrale Y			11		1		6	12				2		
County Total			21				,	15				2		
GDOOHLE		1												
Red Wing Group Home Riverview Manor Yasa Childrens Home	1	1		3 3		2	2 3 2	6 2		1		1 40	1	
County Total	1	1		14		2	,					41	2	
HOUSTON	1													
Houston Co. Group Nome	1	1			9		2	1	1				1	1
County Total	1	1			,		2							
HOWER														
Cedar I Cedar II Cedar III Cedar III Woodwale III		,	1	3		97 5 5	12	5	1		,	1 3		
County Total	1	,	,	,		100		5	1		,		1	
DLMSTED		-	-	-		-	-	Ť	-		-	-		
REM SE REM No Boar Creek Meedow Fark House Stath Street House	1	,		3			13 20 5 6	1				2	1	
Southside Nouse Hiswaska Childrens Home		2				1	15	1				14	2	
County Total	6	3		1		1	60	3		L	_	16	3	L
RICE	1	1	1				1							
Kennedy Johnson Haven Homes, Inc. Harmony Hoese Region Park Eroeger's House Park Avenue								15 8 10 5	2			1		
County Total	1	1			1			62	1		1	1		1
STEELE	T	T	1					1						-
Woodvale II	1					1	1		3	1				1
County Total	1	L	-	-	-	1	1	1	,	1	-		-	1
WABASHA		1				1				1	1		1	1
Rustic Lane Great River Homes	1			1	-	1	1	1	1	:		1	1	
County Total	1	L	1	1	1	L	1	1	1	,	1	1	_	1
WINCHA		1	1	1	1	1	1	1	1	1	1	1	1	1
Minone Group Home I Winone Group Home II	1	1				,	1;	-	1	1	:			
County Total	+	1	+	-	-	1	14	+	+	11	15	-	+	-
REGION POTAL	15	13		19				100				69	6	1
	(4.2)	1.9	10.0	14.2	(8.0)	(19.2	9.02	(22.5	13	1.13	=	1.8)	1.3	0.93

COUNTY OF FIRST RESIDENCE PRIOR TO PRESENT FACILITY (continued)

County	Adult Number	ICFs Percent		ICFs Percent
Dodge	15	4.5	19	4.2
Fillmore	11	3.3	13	Z.9
Freeborn	22	6.6	22	4.9
Goodhue	16	4.8	19	4.2
Houston	9	2.7	9	2.0
Mower	17	S.1	46	10.2
Olmsted	90	27.2	107	23.6
Rice	99	29.9	102	22.5
Steele	6	1.8	6	1.3
Wabasha	11	3.3	14	3.1
Winona	17	S.1	17	3.8
Total Region	313	94.6	374	82.7
Out-Region MK	15	4.5	69	1S.1
Out of State	3	0.9	6	1.3
Unknown	0	0	4	0.9
TOTAL	331	100.0	4S3	100.0

These tables show resident migration among counties. Forty-six percent of the residents came from Olmsted or Rice Counties. As noted earlier 31.6% were referred from state hospitals in Rice and Olmsted Counties.

Approximately 16% came from out-region or out-state to their current facility. Nearly equal numbers, 15.1%, came from out-region or outstate facilities to their prior homes.

COUNTY OF SECOND RESIDENCE PRIOR TO PRESENT FACILITY

County	Adult IC Number Pe		All Numbers	ICFs Percent
Dodge	11	3.4	13	2.9
Fillmore	7	2.1	7	1.5
Freeborn	7	2.1	11	2.4
Goodhue	6	1.8	6	1.3
Houston	3	0.9	3	0.7
Mower	14	4.2	29	4.4
Olmsted	43	13.0	41	10.6
Rice	72	21.1	72	15.9
Steele	5	1.1	7	1.5
Wabasha	3	0.9	1	0.7
Winona	3	0.9	5	1.1
Region Total	(174)	(52.6)	(195)	(43.0)
Out-Region MM	22	6.6	59	13.1
Out of State	8	2.4	9	2.0
Other/Unknown	127	38.4	190	41.9
TOTAL	331	100.0	453	100.0

This table again shows that many did not live elsewhere before their prior residence. Again, Rice and Olmsted were the counties in which the most lived, representing 19% who moved from a state hospital, to a different residence, and then to their current home.

PLANNING CONSIDERATIONS

The study was developed from an HSP V recommendation in the MR component to provide baseline descriptive data on the current residents of the ICFs. The study was not designed for statistical analysis and therefore, major conclusions about the development of more ICF/MR beds cannot be made based only on these findings. However, this data, together with further studies such as description of patients remaining in the state hospitals; could help planners in determining how many beds should be added and where.

Under the Welsch vs. Noot Decree, the state is committed to reducing the state hospital MR population by 1987. Planning considerations to meet the needs of the mentally retarded follow:

1. The average age of ICF residents is 30 years. Although the population is quite young, there are 26 persons over 60 years old and 7 over 70 years old.

With medical and surgical intervention, it appears that the residents' life expectancy may increase as that of the general population has.

2. Respondents expect that approximately 16 percent of the residents surveyed will be appropriate to move to some other residence than a Class A or B ICF by January 1984.

63 (13.9%)	Independent Living
1 (0.2%)	Minnesota State Hospital
5 (1.1%)	Nursing Home
_2 (0.4%)	Other
71 (15.7%)	Total Outside the ICFs

Therefore, 71 beds may be available by January 1984 to accommodate other persons.

3. Under the Welsch v. Noot Consent Decree, a net reduction of 45 mentally retarded persons from southeastern Minnesota who reside in state hospitals . is required by July 31, 1987.

See Appendix C for net reductions needed and maximum utilization levels . allowed for each southeastern Minnesota county by July 31, 1987.

Mower and Rice Counties have the greatest number of residents to transfer, 15 and 10 respectively. Houston, Olmsted and Steele Counties are already below the required 1987 utilization level.

4. Mower County has already exceeded the 16 beds per 10,000 population guideline suggested by SEMHSA. Mower's ratio is 21.5 beds per 10,000 population, 5.5 above the guideline.

Even though under the Welsch v. Noot Decree, Mower County needs to transfer 15 MR state hospital residents by 1987, careful evaluation of needs must be made before there is further development of beds. For example, 12 persons from Woodvale III may be appropriate for independent living by 1984 which would provide 12 of the 15 needed beds.

Rice County also exceeds the 16 beds per 10,000 population guideline. Rice County's ratio is 17.6%, 1.6 above the guideline. Again, careful evaluation of

PLANNING CONSIDERATIONS (continued)

the needs must be made within the county because there may be alternatives to building more ICF beds. Six persons may be appropriate for independent living programs.

5. Sixty-three percent of the currently approved beds are Class A, 37 percent are Class B.

SEMHSA has established the 16 beds per 10,000 population guideline for development of additional ICF/MR beds. The Regional Developmental Disabilities Planning Council has concurred with this guideline.

SEMHSA has recommended that no additional ICF/MR beds should be placed in those counties with 16 or more beds per 10,000 population. It also recommended that those counties with fewer than 10 beds per 10,000 population should receive special consideration when need has been demonstrated for additional beds.

This study confirms that migration of residents among counties should also be considered since in five of the eleven southeastern Minnesota counties, one-third or more of the ICF/MR residents live outside their "home counties". The location of a facility within a county, particularly if near the county border, is a factor in attracting residents from neighboring counties.

Providers, developers, counties, HSAs, the Minnesota Department of Health, the Department of Public Welfare, and other parties interested in the residential care of the mentally retarded and disabled persons should consider the following factors:

- ∉ the age distribution of the residents;
- ∉ the placement goals for the residents;
- ∉ migration in and out of the counties;
- ∉ the number of ICF/MR beds in neighboring counties;
- ∉ the ratio of beds to population;
- ∉ other related resources in counties, such as Developmental Achievement
- ∉ Centers and medical care;
- ∉ equal distribution of beds and programs among the counties; --types of facilities in the county and around the state, i.e., homes for
- ∉ children, Class A or B;
- ∉ economic stability, cost of building, per diem rate; —long-range goals of the system--public, proprietary and nonproprietary
- ∉ programs; and --alternatives which foster flexibility of development,
 i.e., a facility
- ∉ with both Class A and B beds or constructed in such a way that beds could
- ∉ be relicensed if necessary to meet residents' needs.

This study has provided baseline information for planning. With possible changes in funding for the ICFs, further studies should be completed at the state, regional and county levels to further clarify the direction of development. A recommended follow-up study to this baseline study would be a description of the remaining MR state hospital population, including such information as: number of residents, age, sex, secondary disability, level of retardation, types of behavior, and county of reimbursement. An appropriate entity would be the county or state social service agency.

APPENDIX A

ADAPTIVE BEHAVIOR CLASSIFICATIONS OF MENTALLY RETARDED PERSONS

Adaptive behavior classifications follow:

- 1. Mild. Some individuals in this category are also referred to as being educable, since they are able to profit from education programs. Even though they develop slowly, they will grow up to be in large part economically and socially independent. Although they need educational programs directed toward adjustment to accepted social patterns and realistic occupational goals, they also need skilled guidance in selecting and holding suitable jobs. Most of the individuals in this classification are capable of managing their own affairs under favorable circumstances. On occasion, they may need special counseling and guidance to meet a major life crisis, but most are able to work in competitive positions and are able to live independent lives.
- 2. Moderate. Although retarded in their development, many of these individuals are called trainable and can be taught to care for themselves. Even though they will need supervision and support all their lives, they eventually can be taught to do useful tasks at home and can be prepared for work at simple jobs (e.g., in sheltered workshops maintained by agencies for special work training). Some of these individuals may need to be placed in residential care centers, but only when there are no responsible relatives or friends will it be necessary for society to assume a protective role for them,
- 3. Severe. These persons have limited language, speech and motor capabilities. Persons at this level of retardation often have associated physical handicaps. Usually, such individuals have impaired judgment and are unable to make important life decisions for themselves. They are capable of learning certain self-care skills and can develop some facility for self-protection. Although some may need to be placed in residential centers for various reasons, many can live happily at home with their parents.
- 4. Profound. These persons need total care or supervision. They manifest major impairment in physical coordination and sensory-motor development and nearly always require complete custodial care. Usually, they have other physical handicaps and need supervision hour by hour, either at home or in a specially designed residential facility.

Source: An Introduction to Mental Retardation, Ehlers, Krishef, Prothero, Merill Publishing Company, Columbus, Ohio, 1973.

APPENDIX B

INTERMEDIATE CARE FACILITIES FOR THE MENTALLY RETARDED EXISTING AND RECOMMENDED FOR APPROVAL

in Southeastern Minnesota, November 1982

COUNTY/FACILITY	CLASS	ICF/MR BEDS	OMNERSHIP
tudes counts			
DOOGE COUNTY	1 . 1	14	
Fourth Street House, Kasson Dodge Residence, Oodge	1 2	8	
FILLINGE COUNTY	1 . 1	-	
Sunshine Place, Harmony	1 * 1	12	NP.
FREEBORN COUNTY	1 . 1		1000
Crest Home, Albert Lea	1 1	15	100
Woodvale Y. Albert Lea Woodvale YII, Albert Lea	1 1	32	
SOODHUE COUNTY	1		2.5
Red Hing Group Home, Red Wing	1 A 1	12	100
Riverylew Manor, Wanamingo	A	15	167
"Yesa Children's Home, Red Wing Innovative Homes, Red Wing		55 14	888
HOUSTON COUNTY	1 . 1	16	
Group Home, Caledonia	1 4 1	13	30
Group Home, LaCrescent		15	70,
HUMER COUNTY	1 1		
*Cedar I. Austin	1 1	10	
"Cedar I. Austim "Cedar II. Austim "Cedar III. Austim "Ceder IV. Austim	1.5	6	
*Ceder IV Austin	1 1	6	
woodwale III. Austin	1 6 1	41	
Adems Group Home, Adems	1 1	16	
OLMSTED COUNTY	1 1		293.7
REM SE, Rochester REM NW. Rochester		15	
REM NV. Rockester		15	
Bear Creek Mouse, Rochester	1 : 1	:	NP NP
Meadow Park House, Rochester Sixth Street House, Rochester	1 2 1	6	NP.
Southside House, Rochester	1 7 1		MP.
"Hiswatha Children's Home, Rochester	**	44	MP
Hiawatha Adult Home, Rochester		22	NF
REM, Rochester, Inc.	1 1	15 15	;
RICE COUNTY ²			1000
Kennedy-Johnson (7th St. House), Faribault	8A, 78	15	NP.
Haven Homes, Inc., Faribault	1 2	9	RP.
Harmony House, Faribault Region Park, Faribault	l â	12	,
Kroeger's House, Fartbault	A I	-6	
Fart Avenue, Faribault	A	15	
"Imisfail, Fartbault	1 .	16	MP.
STEELE COUNTY			
Mondvale YI, Owstonna ³ Rainbow Residence, Owstonna	1	15 16	1 ;
WABASHA COUNTY			
Rustic Lane, Wabasha	1 4		NP.
Rustic Lane, Webasha Great River Homes, Lake City	A		MP
WINONA COUNTY			-
Winona Group Home I, Winona Winona Group Home II, Winona	1 1	12	NP NP
	32A	618	219
TOTAL	118	370A 2488	ZIMP

^{*}Indicates children's facilities.

¹p indicates "for profit" and NP indicates "not-for-profit" 2Does not include 73 beds at Laura Baker School, Northfield, 3 3Woodvale II was closed; Woodvale VI replaces Woodvale II.

APPENDIX C

MR STATE HOSPITAL POPULATION AND WELSCH VS. NOOT REQUIREMENTS

	Utilization	Total Net	Net Redu	ction Need	ed By Year	1987
County	Level 12/31/81	Reduction Needed by 1987	7/31/83	7/31/85	7/31/87	Utiliza- tion
Dodge	11	4.	2	1	1	7
Fillmore	20	6	0	3	3	14
Freeborn	18	-	-	-	-	18
Goodhue	19	2		-	2	17
Houston	9					10 (-1)
Mower	38	15	3	6	6	23
01msted	39		-	-	-	42 (-3)
Rice	35	10	-	5	5	25
Steele	12	-	-			13 (-1)
Wabasha	15	3	-		3	12
Winona	25	_5	_	2	_3	20
TOTAL	241	45	5	17	23	201 (196)

11% of total hospital MR population

APPENDIX D
UTILIZATION OF SERVICES FOR THE MENTALLY RETARDED
IN STATE HOSPITALS AS OF 12/31/81

	Brainerd	Cambridge	Faribault	St. Peter	Willmar	Total
Dodge		1	9		1	11
Fillmore	1	2	17			20
Freeborn		1	11	1	5	18
Goodhue		3	16			19
Houston		6			3	9
Mower	2	6	26	1	3	38
Olmsted	1	5	32		1	39
Rice			35			35
Steele			11		1	12
Wabasha		1	14			15
Winona	1	5	17	_	1	25
	5	30	188	2	16	241
		(5%)*	(23%)*	(1%)*	(10%)	

^{*}Percent of MR population at the state hospital.

APPENDIX E

QUESTIONNAIRE FORM

-4	El IER	T INCHIT		acilit	_		_	_									_
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ICF/MR RESIDENT ORIGIN STUDY January 1982

1	FIRST	UPT .	HAS PE			PAJOR SOURCE OF PAYMENT	COUNT	TY OF	LEVEL	SECONDARY DIS-	11		YTIVITY	2 YEAR
жи жи		TIPE (ROC)	UNIT I	AL?(d		1-Hedicald	SEI COO SHO	E ET	OF MR 1-Mild 2-Mod 3-Severy 4-Profind	ABILITY 1-CP 2-Epilepsy	SEE COXE SHEET		Type of transpor- tation to program SZZ COOE. SHEET	PLACEMEN 60AL SEE CODE SHEET
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APPENDIX F CODE SHEET

CODE SHEET

MINNESOTA COUNTIES

Sou	theastern PM	28	Cottonwood	60	Otter Tatt
		29	Crow Wing	61	Pennington
01	Dodge	30	Dakota	62	Pine
C2	Fillmore	31	Douglas	63	Pipestone
03	Freeborn	32	Farthault	64	Polt
04	Goodhue	33	Grant	65	Pape
05	Houston	34	Mennegin	66	Ransey
06	Nover	35	Mubbard	67	Red Lake
0.7	Olested	36	Isanti	68	Reduced
DB	Rice	37	Itasca	69	Renville
60	Steele	30	Jackson	70	Reck
10	Wabasha	39	Kanabec	71	Roseau
11	Vingne	40	Kandlyohi	72	St. Louis
-		41	Kittson	73	Scott
Res	L of HH	42	Epochiching	74	Sherburne
		43	Lac gul Parle	75	Sibley
12	Attkin	44	Late	76	Stearns
13	Anoka	45	Late of the Woods	77	Stevens
14	Becker	46	Le Sueur	78	Swift
15	Beltrant	47	Lincole	79	Total
36	Bentan	45	Lypn	80	Traverse
17	Big Stone	49	Mcland	61	Wadena
18	Blue Earth	50	Habrones	82	Waters
19	Brown	51	Marshall	83	Washington
20	Caritan	52	Martin	84	Vatorwan
21	Carver	53	Mesher	85	Pilkin
žž	Cass	54	Mille Lacs	- 11	Wright
25	Chipewa	55	Merrison	87	Tel low Medicine
24	Chisago	56	Purray		181106 MELLETINE
23		57	Micallet	88	Outside of MK
	Clay	58	Mobiles	***	CHARLES OF MY
26	Clearwater	59			
27	Cook	23	Morman		

BESIDENT ORIGIN CODE (ROC)

1	Mone/Seletive
2	Foster Home
1	Boare/Care Home
	ICF/MR Class A
5	ICE PAR CLASS B

6 MM State Mospital
7 Outside MM State Mospital
8 Nursing Home
9 Independent Living
0 Other, specify

ICF/MR RESIDENT ORIGIN STUDY

DAY ACTIVITY

She	Itered Workshops	DAC	<u>s</u>
01	Interstate Rehab. Washp., Red Wing	19	Dodge County DAC
02	Ability Swilding Center, Rochester	20	Fillmore County DAC
03	Occup. Rehab. Center, Winona	21	Treeborn County DAC
04	Careers Training Washp, Owatonna		Coohdue County DAC
05	Cedar Valley Washo, Austin	22	
06	Career Ind., Albert Lea	23	la Manamingo
0.7	Woodland Ind., Caledonia	24	In Wastedo
		25	Mouston County BAC
Sch	ool THR/EHR	-	Hower County DAC
		27	in Austin
80	Is Dodge County	28	In Adams
09	In fillmore County	29	Dimsted County DAC
10		-	Rice County DAC
11 12 13	In Goodhue County	30	In Dundaas
12	In Houston County	31	in Faribault
13	In Hower County	32	Steele County DAC
14	In Olasted County	33	Wabasha County DAC
15	In Rice County	34	Winona County DAC
16	le Steele County	35	
17	In Wabasha County	36	No Day Activity
18	In Winona County	37	Other, specify

Type of Transporation to Program

1	ICF/MR Van or Car	5	Om Car	
2	School Bus	6	Parents/Relative	(Private)
3	City Bus		Other, Specify	
4	Contractual Bus Service			
	(such as 719s)			

2 YEAR PLACEMENT GOAL CODE

1	Home/Relatives	6 MM State Mospital
2	Independent Living Program	7 State Mospital Outside MM
3	Foster Home	& Hursing Name
•	ICF/MR Class A	9 At optimm placement
5	ICF/HR &	O Dther, specify

APPENDIX G

INSTRUCTION SHEET

ICF/HR RESIDENT ORIGIN STUDY

INSTRUCTIONS

Please Read Carefully.

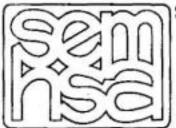
Call Ruth Voss, (507) 285-0900, if you have any questions.

PLEASE FILL IN ONE LINE FOR EACH RESIDENT IN YOUR FACILITY by using the designated coding.

	HROUGH THE SPACE IN THE BOX IF NOT LEAVE ANY SPACES BLANK.	30			34 35			34		40	1
	*	.3	-	Ener	-	2	3	0	6	3	
COLUM	1XSTRICTIONS			ш —	(EXAM	PLE)		11			H
	CLIENT IDENTIFICATION										
6-7	Fill in the resident's first name initial, the first two letters of the resident's la	t name									
	DATE OF BIRTH	-102									
8-9 10-11 12-13	PENTH: Fill in the menth of birth, For example: Fill in the correct day of birth, For YEAR: Fill in the last two digits of the year.	ежирТ	e: the to	elfth is	12.		65,				
14	SEX: Fill in the appropriate code for the	ex of	the resid	ient (1-Hb	le, 2-Fe	sule).					
15-16	YEAR OF ADMESSION TO PRESENT FACILITY: Fill resident came to live in your facility. For					ear in	which t	the			
17-26	RESIDENT ORIGIN										
	"lat Residence Prior to Living in Present !	ecilit	r								
17	Indicate the type of facility in which the facility by using the RESIDENT ORIGIN CORE resident lived in a state hospital in Minne	(ROC)	found or	the CODE							
18-19	Indicate the county where the facility was SEET. For example, the state hospital (Far										
20-21	Indicate the year in which the resident ent					this :	section	by			

22 as in the section above Indicate the type of facility in which the resident lived prior to the one above, the second residence prior to living in your facility, by using the RESIDENT ORIGIN CODE on the CODE SHEET. For example: the person resided with his/her parents prior to living in the state hospital. The number for home/with relatives is number 1. 23 - 24Indicate the county Where the facility was located by using the COUNTY CODE found on the CODE SHEET. For example, the person's hone was located in Wabasha county, number 10, 25 - 26Indicate the year in which the resident entered the facility referred to in this section by using the last two digits of the year. For example; the person entered the parents' home when born; therefore the date of entry would be the birthdate. In this example, the person's birth-date was in 1965, so the numbers you fill in are 65. YEAR PERSON FIRST LEFT HOME (PARENTS): Fill in the last two digits of the year in which the 27-28 person first left home (care of parents). For example: in this example, the person left hone and entered the state hospital in 1976; therefore, you would fill in 76. 29 Indicate the type of facility which the person entered at the time first leaving home by using the RESIDENT ORIGIN CODE (ROC) on the CODE SHEET. For example: in this case, enter 6 for Minnesota State Hospital. HAS PERSON EVER RESIDED IN AD MR UNIT IN A STATE HOSPITAL? 30 Fill in the appropriate code to indicate whether the person has ever resided in « state hospital unit for mentally retarded persons, not including respite care or treatment for mental illness on an MI unit. For example: this example resided in a state hospital, so you would fill in 1 for yes. 31-32 Fill in the last two digits of the year in which the resident was last discharged from the state hospital MR unit. For example: this example was discharged from the state hospital in 1980 and entered your facility then, so you would fill in 80. MAJOR SOURCE OF PAYMENT 33 Fill in the appropriate code for the type of payment which reimburses costs of living for the resident at your facility. If other, specify by writing the type of payment in the box. COUNTY OF REIMBURSEMENT Fill in the COUNTY CODE from the CODE SHEET to indicate which county pays for the resident's care. 34-35 LEVEL OF MENTAL RETARDATION Fill in the appropriate code to indicate the resident's level of mental retardation. 36 37 SECONDARY DISABILITY Fill in the appropriate code to indicate the resident's secondary disability to the primary diagnosis of Mental Retardation. 38-39 DAY ACTIVITY Fill in the code for the name of the Day Program, found on the CODE SHEET, which the resident attends. If the program is not listed, fill in the number 0 for other and write the name of the program Fill in the code from the CODE SHEET for the type of transportation which the resident takes to get to 40 the Day Activity. 41 TWO YEAR PLACEMENT GOAL Fill in the code from the CODE SHEET to indicate the type of facility for which the resident may be appropriate in two years (January 1984) regardless of available finding.





JAN LU IN

MEMORANDUM

TO:

Persons Interested in Services for the Mentally Retarded and

Developmentally Disabled

FROM:

Ruth Voss, Study Coordinator

SUBJECT: ICF/MR Resident Origin Study Report

DATE:

December 21, 1982

Enclosed is the Southeastern Minnesota ICF/MR Resident Origin Study Report for your information. The study was developed from a recommendation in SEMHSA's Health Systems Plan V to provide baseline descriptive data on residents of the ICFs and to assist in reviewing Certificate of Need applications for development of more Intermediate Care Facilities for the Mentally Retarded.

The SEMHSA Board has reviewed and approved the study. The Board wishes to share the results of the study with you with the intent that further studies be done to help clarify the direction of ICF/MR development. It is especially important to consider equally effective alternatives to ICFs at a time of budget cutting.

If you have questions or comments please call Gwen Crawley at (507) 285-0900.

/kms Enclosure.





MEMORANDUM

TO: Key Informants in Minnesota, Michigan, Maine, and

Massachusetts

FROM: Valerie J. Bradley, Project Director

Human Services Research Institute

RE: Factors Affecting Complex Litigation -- Implementation

Analysis for Years 3 and 4

Enclosed please find a copy of the final version of HSRI's Implementation Analysis for Years 3 and 4 of the Pennhurst Longitudinal study -- Factors Affecting Complex Litigation. Following circulation of the draft of the report, project staff received several comments from interviewees in the four states and these comments and suggestions have now been integrated into the final document.

I would like to thank all of you for your cooperation and concern. I would like to offer a special thanks to those of you who took the extra time to make useful and constructive suggestions. Your feedback helped to make the report more accurate and responsive -- a view I hope you will share when you read it.

Please let me know if you have any suggestions for topics we might focus on in our 5th and final year.

Again, many thanks.